

## PART B - FEE(S) TRANSMITTAL

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

21186

7590

02/09/2005

**SCHWEGMAN, LUNDBERG, WOESSNER & KLUTH, P.A.**  
**P.O. BOX 2938**  
**MINNEAPOLIS, MN 55402**

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

**Certificate of Mailing or Transmission**

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Jaclyn Nelson	(Depositor's name)
<i>Jaclyn Nelson</i>	(Signature)
May 9, 2005	(Date)

05/12/2005 WABDEL3 00000035 190743 09832365

01 FC:1504 300.00 OP  
 02 FC:8001 3.00 OP  
 03 FC:1501 400.00 OP 1000.00 OP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/832,365	04/10/2001	Avram Scheiner	279.280US1	7716

TITLE OF INVENTION: CARDIAC RHYTHM MANAGEMENT SYSTEM FOR HYPOTENSION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	05/09/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
OROPEZA, FRANCES P	3762	607-117000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. **Schwegman, Lundberg,**  
 2. **Woessner & Kluth, P.A.**  
 3. \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Cardiac Pacemakers, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

St. Paul, Minnesota

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
☒ Advance Order - # of Copies 1

4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-0773 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

*Suneel Arora*

Date

May 9, 2005

Typed or printed name

Suneel Arora

Registration No.

42,267

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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**THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Avram Scheiner et al.

Title: CARDIAC RHYTHM MANAGEMENT SYSTEM FOR HYPOTENSION

Docket No.: 279.280US1

Filed: April 10, 2001

Examiner: Unknown

Customer No.: 21186

Serial No.: 09/832,365

Due Date: May 9, 2005

Group Art Unit: 3762

Confirmation No.: 7716

Commissioner for Patents

Attn: MAIL STOP ISSUE FEE

P.O. Box 1450

Alexandria, VA 22313-1450

**Notice of Allowance Date:**

February 9, 2005

We are transmitting herewith the attached:

☒ A check in the amount \$ 1400.00 to cover the Large Entity Issue Fee Payment.

☒ A check in the amount \$ 3.00 to cover the Extra Patent Copies Fee (1 copies).

☒ Issue Fee Transmittal (Form PTOL-85).

☒ A check in the amount \$ 300.00 to cover the Publication Fee Payment.

☒ A return postcard.

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SCHWEGMAN, LUNDBERG, WOESSNER & KLUTH, P.A.

Customer Number: 21186

By

  
Suneel Arora

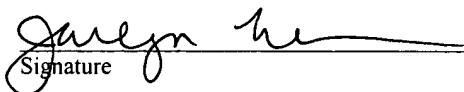
Reg. No. 42,267

S-A:CMG:jmn

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Name

  
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